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CONFIRMATION NO. 5854

<b>SERIAL NUMBER</b> 10/701,014	<b>FILING OR 371(c) DATE</b> 11/03/2003 <b>RULE</b>	<b>CLASS</b> 709	<b>GROUP ART UNIT</b> 2140	<b>ATTORNEY DOCKET NO.</b> 450133-04878	
<b>APPLICANTS</b> Anthony Mai, San Marcos, CA; <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/513,098 10/20/2003 <i>BT</i> <b>** FOREIGN APPLICATIONS *****</b> <i>none BT</i> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 02/04/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>Allowance</i> Acknowledged <i>Examiner's Signature</i> <i>Initials</i>		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 31	<b>TOTAL CLAIMS</b> 30	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 20999					
<b>TITLE</b> Redundancy lists in a peer-to-peer relay network					
<b>FILING FEE RECEIVED</b> 1166	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		